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LEWES EDUCATION COMMITTEE.

Annual Report of the School Medical Officer for 1932.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Report upon the work of the School Medical Service for 1932.

The various subjects are dealt with in this Report as suggested by the Board in Schedule to Form 6 M, issued in November, 1925.

- 1. STAFF.—The Staff consists of a part-time School Medical Officer, a part-time Dental Surgeon, a part-time Anæsthetist and a whole time School Nurse.
- 2. Co-ORDINATION.—The School Medical Officer is also the Medical Officer of Health and the two departments are thereby co-ordinated.
- 3. SCHOOL HYGIENE.—All the Schools are inspected monthly.
- 4. MEDICAL INSPECTION.—Routine inspections are carried out on Tuesdays at the Town Hall, and the Board's Schedule is adhered to.
- 5. FINDINGS AT MEDICAL INSPECTIONS.—See Table II., Medical Inspection Returns.
- 6. INFECTIOUS AND CONTAGIOUS DISEASES.—The figures for 1931 and 1932 are as follow :—

	1931.	1932.
Scarlet Fever	16	7
Diphtheria	2	0
Scabies	2	2
Impetigo	147	88
Ringworm	5	2
Erysipelas... ..	0	1

Infectious cases are taken in hand by the Sanitary Authority, the cases being visited, and any necessary exclusion orders issued. These are registered by the Secretary to the Education Committee, and passed to the Schools concerned, duplicate lists being given to the School Attendance Officer, a part of whose duty it is to see that excluded children return to School on the proper date, or to report any reason there may be for non-return.

No Schools were closed during the year.

7. FOLLOWING UP.—The School Nurse follows up cases referred for treatment, visiting the homes concerned. The number of visits paid during the year was 86. The number of visits paid by her to the schools totalled 798, and the children inspected or re-inspected to 3,217. In 24 children nits were present and these were dealt with in the usual manner. Two children only were found verminous.

8. MEDICAL TREATMENT.—679 children attended the Clinic for treatment or advice under the M.O. (and Nurse under the supervision of the M.O.). The attendances numbered 3,420, as compared with 3,675 in 1931, and a further 279 visits were paid with respect to children reported to be ailing.

By arrangement with the Sussex Throat and Ear Hospital, Brighton, 31 cases of tonsils and adenoids were operated upon.

Refraction cases numbered 34, which were carried out under Atropine, and of the 34 cases given prescriptions all had obtained their spectacles by the end of the year. The School Medical Officer acts as oculist.

Dental cleanliness is still improving; 60 children were referred for treatment by myself at school medical inspections and 14 had the necessary work carried out by the School Dentist, one privately, and others are awaiting treatment.

Arrangements have been made for orthopædic cases to be treated under the scheme of the East Sussex County Council at the Castlegate Clinic in Lewes. The number of cases sent was 10 and they made 45 attendances.

In connection with the eye-work it may be stated here that all severe cases of short sight and squint are re-examined every three months and all cases of these defects every six months. In addition, all frames are inspected monthly. Severe defects of vision are less than one per cent. of the total children on the registers.

Cleanliness has received special attention and a Conference of the Committee and all teachers was held in September and addressed by the School Medical Officer. Cases of Impetigo numbered 12 for the last quarter of the year—the lowest quarterly incidence for three years.

9. OPEN-AIR EDUCATION.—None.

10. PHYSICAL TRAINING.—As laid down in 1919 Syllabus.

11. PROVISIONS OF MEALS.—No requirements.

12. SCHOOL BATHS.—No baths are provided in the schools, but the Town Council has, as before, kindly granted the use of the Swimming Bath, and classes for boys and girls are held in the summer, five days a week, for teaching swimming, and the progress is good.

13. CO-OPERATION OF PARENTS.—When a child is on the list for examination at the Thursday inspections, notices are sent to parents inviting their attendance. This year 343 out of 485 attended, 70·7 per cent., as compared with 310 out of 421 last year, 73·6 per cent. In 8 cases parents refused consent to the proposed examination.

14. CO-OPERATION OF TEACHERS.—At every visit to a school each teacher is invited to draw my attention to any child that may be considered to depart from the normal, either physically or mentally, and any case so mentioned is dealt with as required.

15. CO-OPERATION OF SCHOOL ATTENDANCE OFFICER.—This Officer reports any medical reason alleged as the cause of absence, and also reports as to the return of cases, such as “contacts” who may have been excluded.

16. CO-OPERATION OF VOLUNTARY BODIES.—The East Sussex Voluntary Association for Mental Welfare render the Committee much assistance by attending to the welfare of imbecile, mentally defective and borderline cases. During the past year they have had nine children under supervision at various times. The Secretary reports that all the cases are doing well.

The services of the N.S.P.C.C. have not been called upon during the year and consequently no payment has been made to the Society.

The Maternity and Child Welfare Centre, although not supervised by the Education Authority, is doing most useful work.

17. BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.—One child suffering from a degree of blindness necessitating special education is attending Barclay Home and School, Brighton.

18. NURSING SCHOOLS.—None.

19. SECONDARY SCHOOLS.—None.

20. CONTINUATION SCHOOLS.—None.

21. EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.—Under the Bye-Laws there are 50 children employed at permissible work, and permission is not given in any doubtful case without the approval of the M.O.

22. SPECIAL ENQUIRY.—WEIGHTAGE AND HEALTH.

In my last report I recorded the fact that nearly six per cent. of the Lewes school children were found to be ten or more per cent. below the average weights corresponding to their heights. Emerson, working on the same lines in America, takes a deficiency of seven per cent. as the limit of his “safety-zone.” Hence in investigating these cases in 1932 I have divided them into two categories, namely, those exhibiting a deficiency (1) of 7 per cent. but less than 10, and (2) of 10 per cent. or more.

Of the original 99 cases investigated, one died, the cause of death being given as “influenza and vagal inhibition.” In all probability this was a case of vitamin deficiency. Another case exhibited the possibility of low weightage for height being quite compatible with health. I believe such cases to be far less common than they are said to be. Of the 97 cases remaining, in 37 no improvement was obtained, and of the 60 improved, 7 were restored to normal weight or better; 34 brought within the safety-zone; 14 to the “7 and less than 10 per cent.” category, leaving a final 5 who are still below the 10 per cent. margin. The following tables give the results obtained in a concise form:—

Deficiency.	Improved.	Not Improved.	Totals.
—7 to —9 per cent	20	5	25
—10 per cent. or more	40	32	72
Totals... ..	60	37	97

Only one-fourth of the less serious deficiencies have responded to "treatment"; whereas five-ninths of the more serious have benefited—a sufficient indication of the clinical importance of a weightage survey.

Per cent. Deficiency.	January, 1932.	December, 1932.
+	—	2
0	—	5
- 1 to - 6	—	34
- 7 to - 9	25	20
-10 to -14	60	28
-15 to -19	10	7
-20 &c.	2	1
Totals	97	97

The upward trend of the weights can be seen at a glance, nearly one-half of these children having been lifted to Emerson's safety-zone. The next table gives the clinical conditions found and the respective results obtained. The unbracketed figures represent the children whose weights showed a deficiency of 10 per cent. (or more); the bracketed those whose deficiency was 7 per cent. but less than ten.

Condition found.	Improved to					Not Improved.
	Above Normal.	Normal.	Below -7 %	Below -10 %	Other.	
A. 1. Premature Birth	—	—	—	—	1	1
2. Birth Injury	—	—	—	—	—	1
3. Past Rickets	—	—	—	—	—	1
B. 1. Under-feeding	—	—	1	—	—	—
2. Vitamin Deficiency	1	—	7 (3)	7 (1)	1	—
C. 1. Auto-intoxication (bowel) ...	—	—	1	—	—	2
2. Acidosis	(1)	—	3	—	—	1
3. Gastritis	—	—	—	—	—	1
4. Threadworms	—	—	—	—	—	1
D. 1. Debility (after 'flu)	—	(1)	(1)	—	—	—
2. „ (after whooping-cough)	—	—	(1)	—	—	—
E. 1. Tuberculosis (lung)	—	1	—	1	1	1
2. „ (abdomen)	—	—	—	—	—	1
3. „ (Thoracic Glands)	—	—	—	—	—	1
F. 1. Chronic Interstitial Pneumonia...	—	—	—	—	—	1
G. 1. Sepsis (tonsillar)	—	1 (1)	2 (2)	1	—	5 (2)
2. „ (teeth)	—	—	2 (3)	1	—	2 (1)
3. „ (mastoid)	—	—	1 (1)	—	—	1
H. 1. Rheumatism	—	—	(1)	—	1	1
2. Chorea	—	—	1	—	—	—
J. 1. Heart (organic)	—	—	1 (1)	1	—	—
2. „ (functional)	—	—	(1)	—	—	—
3. Anæmia	—	—	—	—	—	1
K. 1. Neurosis (shock)	—	—	1	—	1	—
2. „ (fatigue)	—	(1)	—	—	—	1
3. Old Infantile Paralysis	—	—	—	1	—	—
Miscellaneous	—	—	(1)	—	—	9 (2)
Totals	2	5	34	14	5	37

NOTES.—The length of the list of “conditions found” indicates the sort of mixed bag that results when low weightages are investigated. Group A. gives the cases suffering from a bad start. They react very slowly to attempts at amelioration. Group B. is the most satisfactory one from the clinical standpoint, all the 21 cases showing improvement on a vitamin diet. The case improved to “above normal” obtained a quart of fresh milk every day from a neighbouring farm. In C. (1), the improved case was falling behind in her school work through “dreaming in class.” Her weight deficiency of 12 per cent. was brought down to 6; but as she was put on half-time her mother removed her to a private school. After this let none say that education is not appreciated. In group E. (1), the case restored to normal was one of lung fibrosis; a diagnosis in which three of us agreed—*mirabile dictu*. This case had an original deficiency of 12 per cent. The second case in this series was a recent lung tuberculosis improved from minus 20 per cent. to minus 9. The 7 cases with chronic tonsillar sepsis G. (1), that improved were all treated by operation. The high proportion of throat operations performed has received much attention recently and it is worth recording that one case (not in this series), put on 10-lbs. in 5 months after tonsillectomy. The 2 cases of fatigue recorded were both the result of excessive cycling. The case of infantile paralysis (K. 3), was reported by the Head Teacher as being “most difficult.” She is now reported as giving “no trouble at all.”

The last column that deals with the “not improved” has a rather mournful aspect, though as Tennyson should have said, “’Tis better to have tried and failed than never to have tried at all.” It contains 7 cases of tonsillar sepsis, of whom 4 refused treatment, one is a chronic asthmatic, a sixth has been kept back by a severe attack of whooping-cough and the last is now awaiting operation, which has been postponed owing to debility resulting from poor feeding. Of the 3 septic teeth cases, 2 have refused and 1 has been treated only recently and may be expected to improve. The unimproved case of mastoid disease may be called “a lesson for parents.” The mother was warned of a running ear and declined advice. A fortnight later the child was rushed into hospital for an emergency operation. This is the only case of the whole 97 that has suffered a further loss in weight. The miscellaneous group that closes the list includes 6 undiagnosed, 1 mental deficient, 1 with endocrine disturbance (the only improved case) and 4 that I call “energisers”—the thin and wiry type, active and alert, with a slightly raised temperature and quickened pulse, who appear to burn up their food in animal spirits and to have none left for growth.

23. MISCELLANEOUS.—Tonsillar operations are recommended only on the advice of an expert. The work done in cases of malnutrition has been facilitated by the issue of cards, giving height, weight and the excess (or deficiency) of the actual weight as compared with scale-weight for height. Also by the issue of leaflets giving a list of the best foods for cases of low weightage. In addition to the work normally undertaken, an attempt will be made in 1933 to test the vision of all children of six and seven in accordance with the recommendation of the Chief Medical Officer; for which purpose a shortened test card has been designed. Also to test the colour vision in boy leavers and to investigate “immunity from caries” as requested by the Chief Medical Officer of the Board.

Your obedient Servant,

W. R. DUNSTAN, M.B., M.Sc., D.P.H.

School Medical Officer.

February 6th, 1933.

STATISTICS.

TABLE I.—RETURN OF MEDICAL INSPECTIONS.

A. ROUTINE MEDICAL INSPECTIONS.							
Number of Code Group Inspections—							
Entrants	...	...	...	...	...	...	118
Intermediates	...	...	...	...	...	...	133
Leavers	...	...	...	...	...	...	188
Total							439
Number of other Routine Inspections					...	...	46
B. OTHER INSPECTIONS.							
Number of Special Inspections					...	...	224
Number of Re-inspections					...	...	763
Total							1472

TABLE II.

A. RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1931.

Defect or Disease.					Routine Inspections.		Special Inspections.	
					No. of Defects.		No. of Defects.	
					Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation, but <i>not</i> requiring Treatment.
(1)					(2)	(3)	(4)	(5)
Skin	Malnutrition	...	...	...	—	37	—	40
	Uncleanliness	...	...	...	—	—	—	—
	(See Table IV., Group V.)				—	—	—	—
	Ringworm :				—	—	—	—
	Scalp	...	...	...	—	—	—	—
Eye	Blepharitis	...	...	...	—	1	8	—
	Conjunctivitis	...	...	...	—	—	14	—
	Keratitis	...	...	...	—	—	—	—
	Corneal Opacities	...	...	...	—	—	—	—
	Defective Vision (excluding Squint)	...	...	...	6	3	22	1
Ear	Squint	...	...	...	—	—	1	—
	Other Conditions	...	...	...	1	—	4	—
	Defective Hearing...	...	...	...	—	1	2	1
	Otitis Media	...	...	...	—	1	—	2
	Other Ear Diseases	...	...	...	—	—	—	—
Nose and Throat	Enlarged Tonsils only	...	...	...	8	—	16	—
	Adenoids only	...	...	...	2	—	1	—
	Enlarged Tonsils and Adenoids...	...	...	...	1	—	2	—
	Other Conditions	...	...	...	1	2	9	1
	Enlarged Cervical Glands (Non-Tuberculous) .				1	3	—	2
Defective Speech					—	—	1	—
Heart and Circulation.	Heart Disease :				—	—	—	—
	Organic	...	...	...	—	—	—	1
	Functional	...	...	...	—	1	—	2
	Anæmia	..	...	...	—	—	—	1
	Other Non-Tuberculous Diseases	...	...	...	—	—	—	—
Tuber- culosis	Pulmonary :				—	—	—	—
	Definite	...	...	...	—	—	—	—
	Suspected	...	...	...	—	—	—	—
	Non-Pulmonary :				—	—	—	—
	Glands	...	...	...	—	—	1	—
	Spine	...	...	...	—	—	—	—
	Hip	...	...	...	—	—	—	—
	Other Bones and Joints	...	...	...	—	—	—	—
	Skin	...	...	...	—	—	—	—
	Other Forms	..	...	...	—	—	—	—

	(1)	(2)	(3)	(4)	(5)
Nervous System	{ Epilepsy	—	—	—	—
	{ Chorea	—	—	2	7
	{ Other Conditions	1	2	3	7
Deformities.	{ Rickets	—	—	—	—
	{ Spinal Curvature	—	—	3	—
	{ Other Forms	—	1	4	—
Other Defects and Diseases	... ..	1	1	13	12

B. NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (Excluding uncleanness and Dental Diseases).

Group.	Number of Children.		Percentage of Children found to require treatment.
	Inspected.	Found to require treatment.	
(1)	(2)	(3)	(4)
CODE GROUPS :			
Entrants	118	6	5.1
Intermediates	133	10	7.5
Leavers	188	6	3.2
Total (code groups)	439	22	5.0
Other routine inspections	46	—	—

TABLE III.—RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Boys.	Girls.	Total.
Multiple Defects.					(None)
Blind (including partially blind).	(i) Suitable for training in a School for the totally blind.	At Certified Schools for the Blind At Public Elementary Schools At other Institutions At no School or Institution			
	(ii) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or Partially Blind .. At Public Elementary Schools At other Institutions At no School or Institution	—	1	1
Deaf (including deaf and dumb and partially deaf).	(i) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf At Public Elementary Schools At other Institutions At no School or Institution			
	(ii) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf ... At Public Elementary Schools At other Institutions At no School or Institution			
Mentally Defective.	Feeble-minded	At Certified Schools for Mentally Defective Children At Public Elementary Schools At other Institutions At no School or Institution	1	1	2
	Notified to the Local Control Authority during the year.	Feeble-minded Imbeciles Idiots			
Epileptics.	Suffering from severe epilepsy.	At Certified Special Schools for Epileptics In Institutions other than Certified Special Schools At Public Elementary Schools At no School or Institution			
	Suffering from epilepsy which is not severe.	At Public Elementary Schools At no School or Institution	—	2	2

			Boys.	Girls.	Total.	
Physically Defective.	Active pulmon-ary and glandu-lar tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At other Institutions ... At no School or Institution				
	Quiescent or arrested pulmonary tuber-culosis (including pleura and intra-thoracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open Air Schools... .. At Certified Day Open Air Schools At Public Elementary Schools At other Institutions ... At no School or Institution	1	1	2	
	T.B. Glands.	At Certified Residential Open Air Schools... .. At Certified Day Open Air Schools At Public Elementary Schools At other Institutions ... At no School or Institution	1	4	5	
	T.B. Bones, &c.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions ... At no School or Institution	— 1	1 2	1 3	
	Crippled Children (other than those with active tuber-culous disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Hospital Schools At Certified Residential Cripple Schools At Certified Day Cripple Schools At Public Elementary Schools At other Institutions ... At no School or Institution	3 1	1 1	4 2	Who should be receiving special school education. (0) (0)

TABLE IV. — RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER.

TREATMENT TABLE.

Group I.—Minor Ailments (excluding Uncleanliness, for which see Group V.).

Disease or Defect.	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)
<i>Skin—</i>			
Ringworm-Scalp	—	—	—
Ringworm-Body	—	2	2
Scabies	—	2	2
Impetigo	80	8	88
Other skin disease	31	—	31
<i>Minor Eye Defects</i> (External and other, but excluding cases falling in Group II.).	27	4	31
<i>Minor Ear Defects</i>	5	—	5
<i>Miscellaneous</i> (e.g., minor injuries, bruises, sores, chilblains, &c.).	217	54	271
Total	362	68	430

TABLE IV (Contd.)

Group II.—*Defective Vision and Squint* (excluding Minor Eye Defects treated as Minor Ailments—Group I.).

Defect or Disease.	Number of defects dealt with.			
	Under the Authority's Scheme.	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint). (Operations for squint should be recorded separately in the body of the Report).	34	—	—	34
Other Defect or Disease of the eyes (excluding those recorded in Group I.).	—	—	2	2
Total	34	—	2	36

Total number of children for whom spectacles were prescribed

(a) Under the Authority's Scheme.....	34
(b) Otherwise.....	0

Total number of children who obtained or received spectacles

(a) Under the Authority's Scheme	34
(b) Otherwise.....	0

Group III.—*Treatment of Defects of Nose and Throat.*

Number of Defects.				
Received Operative Treatment.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme, in Clinic or Hospital.	By Private Practitioner or Hospital, apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
23	2	25	4	29

TABLE IV (Contd.).

Group IV.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentist :

Aged :

Routine Age Groups	5... 100	}	Total.....	1174
	6... 112			
	7... 123			
	8... 120			
	9... 147			
	10... 150			
	11... 166			
	12... 137			
	13... 108			
	14... 11			

Specials	13
Grand Total	1187

(b) Found to require treatment	869
(c) Actually treated	388

(2) Half-days devoted to	{ Inspection..... 9	}	Total	86
	{ Treatment.....77			

(3) Attendances made by children for treatment	1039
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(4) Fillings	{ Permanent teeth ... 238	}	Total	307
	{ Temporary teeth ... 69			

(5) Extractions	{ Permanent teeth ... 150	}	Total	808
	{ Temporary teeth ... 658			

(6) Administrations of general anaesthetics for extractions	94
---	----

(7) Other operations	{ Permanent teeth .....68	}	Total	137
	{ Temporary teeth69			

Group V.—Uncleanliness and verminous conditions.

(i) Average number of visits per school made during the year by the School Nurse	99.7
(ii) Total number of examinations of children in the Schools by the School Nurse.....	3217
(iii) Number of individual children found unclean	24
(iv) Number of children cleansed under arrangements made by the Local Education Authority.....	0
(v) Number of cases in which legal proceedings were taken :	
(a) Under the Education Act, 1921.....	0
(b) Under School Attendance Byelaws	0

REPORT OF SCHOOL NURSE.

MR. CHAIRMAN, MRS. SEVERS AND GENTLEMEN,

I beg to submit for your consideration my Twenty-first Annual Report.

I have attended 24 times at Routine Medical Inspections; 77 times at Dental Clinic, and paid 9 visits to the various schools with the School Dentist for the inspection of children's teeth.

86 visits have been paid in following up cases after Routine Medical Inspection; 279 visits in respect of children reported sick, the increased number of visits over last year being due to my acting for the School Attendance Officer during his illness, and 798 visits to the various schools.

3,217 children have been inspected and re-inspected.

29 warnings were issued to parents with respect to 24 children in 20 families, who were found to have nits on their hair; 2 children (sisters) were found in a verminous condition and were excluded from school under Sec. 87, Education Act, 1921. Both returned to School clean.

679 children paid 3,420 visits to the School Clinic.

There have been 88 cases of Impetigo. 80 of these cases were treated at the Clinic and 8 privately; 2 cases of Scabies treated at home; 2 cases of Ringworm of body, treated at Clinic; 5 cases of discharge from ear, treated at the Clinic and 1 sent to Brighton Throat and Ear Hospital for operation for Mastoid. 2 cases of enlarged glands; 31 cases of Eczema, Herpes and other skin disease, all of whom were treated at Clinic, including a case of Warts, completely cured by the use of "Spurge."

29 children were examined *re* eyesight, 19 new cases were prescribed for; all have glasses, and in the case of 10 children there was no finding. 47 children were re-examined of whom 15 required new glasses, which were obtained; 3 required new frames and 1 was referred to the Sussex Eye Hospital for Squint. 24 were found satisfactory and 3 cases were found to have so improved that glasses were no longer required.

31 cases of minor eye defect, 27 treated at Clinic and 4 privately.

434 other children attended Clinic for treatment or advice, of whom 112 were under observation for Debility, 11 for Chorea, 40 were seen *re* Tonsils, Adenoids, etc., and 271 for minor ailments, of whom 217 were treated at the Clinic and 54 privately, making a total of 362 children treated by me under the supervision of the School Medical Officer.

I am,

Yours faithfully,

IDA M. SAWBRIDGE.

January, 1933.

REPORT OF THE SCHOOL DENTIST.

TO THE LEWES EDUCATION COMMITTEE.

MR. CHAIRMAN, MRS. SEVERS AND GENTLEMEN,

I beg to submit my Eighteenth Annual Report as to Dental Work carried out by me for the year ended December 31st, 1932.

The number of children examined and attended to during the year is shown in Table IV.

Of the 388 children attended to during the year, 13 were cases of defects found at Medical Inspections and referred by the School Medical Officer.

I should like again to express my thanks to Nurse Sawbridge for assistance rendered by her during the year.

The total fees paid by parents during the year amount to £15. 5s. 3d.

I am,

Yours faithfully,

F. A. BECKLEY, L.D.S.

January, 1933.